the desired the desired that the desired th

ťů

l ali

Please type a plus sign (+) inside this box [+]

PTO/SB/50 (12/97)

Approved for use through 09/30/00. OMB 0651-0033

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Outlined the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Attc	REISSUE PATENT APPLICATION TRANSMITTAL Attorney Docket No. 42390.P3187R					
	-	Inventor Albert Fazio				
		nt No. 6 740 540				
	Original Patent Issue Date April 21, 1998 (Month/Day/Year) Express Mail Label No. EL 867649029 US Total Pages 2					
ADE	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231					
APP		N FOR REISSUE OF: [] [] blicable box) Utility Patent Design Patent Plant Patent				
APP	LICATION	N ELEMENTS				
1.	x	Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing)				
2.	<u>x</u>	Specification (amended, if appropriate)				
3.	X	Drawings(s) (proposed amendments, if appropriate)				
4.	X	Reissue Oath/Declaration (original or copy) (37 CFR 1.175) (PTO/SB/51 or 52)				
5.	Original U	J.S. Patent				
	X	Offer to Surrender Original Patent (37 CFR 1.178) (PTO/SB/53 or PTO/SB/54)				
	OR	Ribboned Original Patent Grant				
		Affidavit/Declaration of Loss(PTO/SB/55)				
3.	Original U	J.S. patent currently assigned?				
	X	Yes				
		No				
	(If Yes, ch	neck applicable box(es))				
	x	Written Consent of all Assignees (PTO/SB/53 or 54) UNSIGNED				
		37 CFR 3 73(b) Statement				
		Power of Attorney				
7.	4 /07	Transfer drawings from Patent File				

Reg. Number:	25,129 Telephone Number: (408) 720-8300				
Signature: Date: 2/21/12					
Typed or Printed Name: Edwin H. Taylor					
Country U.S.A. TELEPHONE (408) 720-8300 FAX (408) 720-8383 SUBMITTED BY:					
Country 110 A					
CITY <u>Los Ang</u>	eles STATE California ZIP CODE 90025-1026				
	Seventh Floor				
ADDRESS _	12400 Wilshire Boulevard				
	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP				
INAIVIE.	Edwin H. Taylor				
X Corres	spondence Address Below				
, , , ,	or				
Custo	Customer Number or Bar Code Label (Insert Customer No. or Attach Bar Code Label here)				
	SPONDENCE ADRESS				
14. <u> </u>	Other: Copy of postcard with certificate of mailing showing contents therein.				
14. x	Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Other: Copy of postcard with certificate of mailing showing contents therein				
13. x	·				
12.	Preliminary Amendment				
	b. Statement filed in prior application, Status still proper and desired				
11	a. Small Entity Statements(s)				
10.	English Translation of Reissue Oath/Declaration (if applicable)				
	b. Copies of IDS Citations				
9.	a. Information Disclosure Statement (IDS)/PTO-1449				
8.	Foreign Priority Claim (35 USC 119) (if applicable)				
ACCOMPANYING APPLICATION PARTS					

Assignment and Cover Sheet

Certificate of Mailing 4

Declaration & POA (4

((Financian - A.A. 199) 111 1					
"Express Mail" mailing label number: EL867649029US					
Date of Deposit: February 21, 2002					
I hereby certify that I am causing this paper or fee to					
be deposited with the Ur	nited States Postal Service				
"Express Mail Post Offic	e to Addressee" service on				
the date indicated above	and that this paper or fee				
	the Assistant Commissioner				
for Patents, Washington	, D. C. 20231				
Beverly Kehoe She					
	of person mailing paper or fee)				
Darelat	The Stee				
(Signature of person ma	iling paper or fee)				
tobruar	721,2002				
(Date signed)					
Serial/Patent No.: Not Yet Assigned	Filing/Issue Date: Herewith				
Client: Intel Corporation Title: A FLASH MEMORY DEVICE					
VOLTAGE OF MEMORY CELLS ON A	OF CAPABLE OF SENSING A THRESHHOLD PAGE MODE OF OPERATION				
BSTZ File No.: 42390.P3187R	OF CLUMITION				
Date Mailed: 2-2 1-02	Docket Due Date				
The following has been received in the U.S. Pa	tent & Trademark Office on the date stamped bereon:				
Amendment/Response (pgs.) Appeal Brief (pgs.) (in truplicate)	Express Mail No. 100704902903 Check No. 483				
Application - Utility (pgs., with cover and abstract)	Month(s) Extension of Time Amt: 740.				
Application - Rule 1.53(b) Continuation (pgs.)	Information Disclosure Statement & PTO 1449 (4 pgs.) Check No				
Application - Rule 1 53(b) Divisional (pgs.)	☐ Issue Fee Transmittal Amt: ☐ Notice of Appeal				
Application - Rule 1.53(b) CIP (pgs.)	Petition for Extension of Time				
Application - Rule 1 53(d) CPA Transmittal (pgs.)	Petition for				
Application - Design (pgs.)	Postcard				
Application - PCT (pgs.)	Power of Attorney (pgs.)				
Application Reissue	Preliminary Amendment (page)				

Other: Consent of Assignee to Reissue and Statement of Ownership (unsigned), Offer to Surrender Original Patent (Unsigned), Copy of U.S. 5,742,543; copy of cited reference (1).

signed

_ pgs.)

☐ Disclosure Does & Ong & Copy of Inventor's Signed Lener(____

Drawings. ____# of sheets includes _____ figures

Preliminary Amendment (____ pgs.)

☐ Response to Notice of Missing Parts

Transmittal Letter, in duplicate

Fee Transmittal, in duplicate

Small Entity Declaration for Indep. Inventor/Small Business

Reply Brief (_____ pgs.)

PTO/SB/17(09/00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TOTAL AMOUNT OF PAYMENT (\$)	FEE TRANSMITTAL FOR FY 2002						
Complete if Known: Application No. Unassigned Application No. Unassigned Iterative Herewith Iterative It	TOTAL AMOUNT OF PAYMENT (\$) 740.00						
Filing Date Herewith First Named Inventor Albert Fazio Group Art Unit Unassigned Examiner Name Unassigned Unas	1 -	Complete if Known:					
First Named Inventor Albert Fazio Group Art Unit Unassigned Examiner Name Unassigned Altomey Docket No. 42390 P31878 METHOD OF PAYMENT (check one) 1. [x] The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number O2-266 Deposit Account Name [x] Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 [] Applicant claims small entity status. See 37 CFR 1.27 2x Payment Enclosed: _x Check Money Order Other FEE CALCULATION 1. BASIC FILING FEE Large Entity Small Entity Fee Fee Fee Fee Fee Code (5) Code (5) Eee Description 101 740 201 370 Utility application filing fee 106 330 205 165 Design application filing fee 107 510 207 205 Plant filing fee 108 740 208 370 Relesues filing fee 114 160 214 80 Provisional application filing fee 2. EXTRA CLAIM FEES Extra Claims Pee Fee Fee Fee Fee Fee Code (5) Code (5) Fee Description 114 160 218 30 9 Claims in excess of 20 and over original patent 115 203 9 103 18 203 9 Claims in excess of 20 and over original patent 116 18 203 9 142 "Relissue Independent claims in excess of 20 and over original patent 110 18 210 9 "Relissue Independent claims in excess of 20 and over original patent 110 18 210 9 "Relissue Independent claims in excess of 20 and over original patent 110 18 210 9 "Relissue Independent claims in excess of 20 and over original patent 110 18 210 9 "Relissue Independent claims in excess of 20 and over original patent 110 18 210 9 "Relissue Independent claims in excess of 20 and over original patent 110 18 210 9 "Relissue Independent claims in excess of 20 and over original patent 117							
Coroup Art Unit			sue Date: <u>April 21, 1998</u>				
Examiner Name							
METHOD OF PAYMENT (check one)							
1.							
any over payments to: Deposit Account Number	METHOD OF PAYMENT (check one)					
Deposit Account Name		i i i i i i i i i i i i i i i i i i i					
[] Applicant claims small entity status. See 37 CFR 1.27 2x			- Area was				
2.	[x] Charge Any	y Additional Fee Required Under 37 CFR 1	.16 and 1.17				
Money Order Other	[] Applicant c	claims small entity status. See 37 CFR 1.2	7				
1. BASIC FILING FEE Large Entity	2. <u>x</u> Payment Er	Money Order					
Large Entity	FEE CALCULATION						
Fee	1. BASIC FILING FEE						
Code (\$) Code (\$) Fee Description Fee Paid	Large Entity Small Entity	Y					
101	1	_					
106 330 206 165 Design application filling fee 107 510 207 255 Plant filling fee 740.00	(4)		Fee Pa	id			
107 510 207 255 Plant filling fee 740.00							
108				_			
2. EXTRA CLAIM FEES Extra Claims Extra Claims Fee from below Fee Paid Total Claims -20** =		Reissue filing fee	740.0	<u> </u>			
2. EXTRA CLAIM FEES Extra Claims Extra Cla	114 160 214 80	Provisional application filing fee		_			
Total Claims			SUBTOTAL (1) \$ 740.00				
Total Claims	2. EXTRA CLAIM FEES		Fee from				
Independent Claims		Extra Claims	below Fee Pa	id			
Independent Claims			X =				
Multiple Dependent **Or number previously paid, if greater; For Reissues, see below. Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description 103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 **Reissue independent claims over original patent 110 18 210 9 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 0	Independent Claims	- 3** =		- 1			
Large Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description 103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 **Reissue independent claims over original patent 110 18 210 9 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 0			=				
Fee Fee Fee Fee Code (\$) Code (\$) Fee Description 103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 **Reissue independent claims over original patent 110 18 210 9 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 0	**Or number previously paid, if greater; For Reissues, see below.						
Code (\$) Fee Description 103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 **Reissue independent claims over original patent 110 18 210 9 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$							
103		_					
102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 **Reissue independent claims over original patent 110 18 210 9 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 0	1 (+)						
104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 **Reissue independent claims over original patent 110 18 210 9 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 0							
109 84 209 42 **Reissue independent claims over original patent 110 18 210 9 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 0		Multiple dependent claim, if not paid					
110 18 210 9 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 0		**Reissue independent claims over or	iginal patent	İ			
FEE CALCULATION (continued)	110 18 210 9	**Reissue claims in excess of 20 and	over original patent				
FEE CALCULATION (continued)	CHRTOTAL (a) & a						
	FEE CALCULATION (cont	inued)	OUDIVIAL (Z) \$ 0				

10/04/01

The state of the s

ļ ala

3.	ADDITIO	NAL FEE	S		· · · · · · · · · · · · · · · · · · ·
	e Entity	Small I	<u>Entity</u>		
Fee	Fee	Fee	Fee		
Code	(+)	Code	(\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
099	8,800	099	8,800	Request for inter parties reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive – unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per	
1				property (times number of properties)	
146	740	246	370	For filing a submission after final rejection	
				(see 37 CFR 1.129(a))	
148	110	248	55	Statutory Disclaimer	
149	740	249	370	For each additional invention to be examined	
١				(see 37 CFR 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design	
				application	
195	300	195	300	Publication fee for early, voluntary, or normal pub.	
196	300	196	300	Publication fee for republication	
194	130	194	130	Request for voluntary publication or republication	
098	130	098	130	Processing fee under 37 CFR 1.17(i) (except provisionals)	
091	1,280	091	1,280	Acceptance of unintentionally delayed claim for priority	
Other	fee (specif	·v)			
	fee (specif				
				SUBTOTAL (3) \$_	0
*Reduced by Basic Filing Fee Paid					
SUBN	IITTED BY	<u>/</u> :			······································
Турес	l or Printe	d Name:	Edwin	H. Taylor	
Signa	ture:	L	-1 t A	Date: 1/2 /02	
Reg. 1	Number:	25,12	9	Telephone Number: (408) 720-830	0

(408) 720-8300

42390.P3187R PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent of)		
)		
Albert Fazio)	Examiner:	Unassigned
)		
Patent No. 5,742,543)	Art Unit:	Unassigned
)		_
Issued: April 21, 1998)		
•)		
For: A FLASH MEMORY DEVICE OF)		
CAPABLE OF SENSING A THRESHOLD)		
VOLTAGE OF MEMORY CELLS ON A PAGE)		
MODE OF OPERATION)		
Box: Reissue			
Assistant Commissioner for Patents			
Washington, D.C. 20231			

OFFER TO SURRENDER ORIGINAL PATENT UNDER MPEP §1416 AND 37 CFR § 1.178

Sir:

The original Patent for A FLASH MEMORY DEVICE OF CAPABLE OF SENSING A THRESHOLD VOLTAGE OF MEMORY CELLS ON A PAGE MODE OF OPERATION, U.S. Patent Number 5,742,543, is not being submitted with the accompanying reissue application. Its surrender, however, is hereby proffered and it will be forwarded to the United States Patent and Trademark Office upon my being informed that the reissue application is in condition for allowance.

If there is a deficiency in fees, please charge our Deposit Account No. 02-2666.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: $\frac{1}{2}$

Edwin H. Taylor Reg. No. 25,129

12400 Wilshire Blvd., Seventh Floor Los Angeles, CA 90026-1026 (408) 720-8300